

URBAN/MUNICIPAL

CA4 ON HBL I83

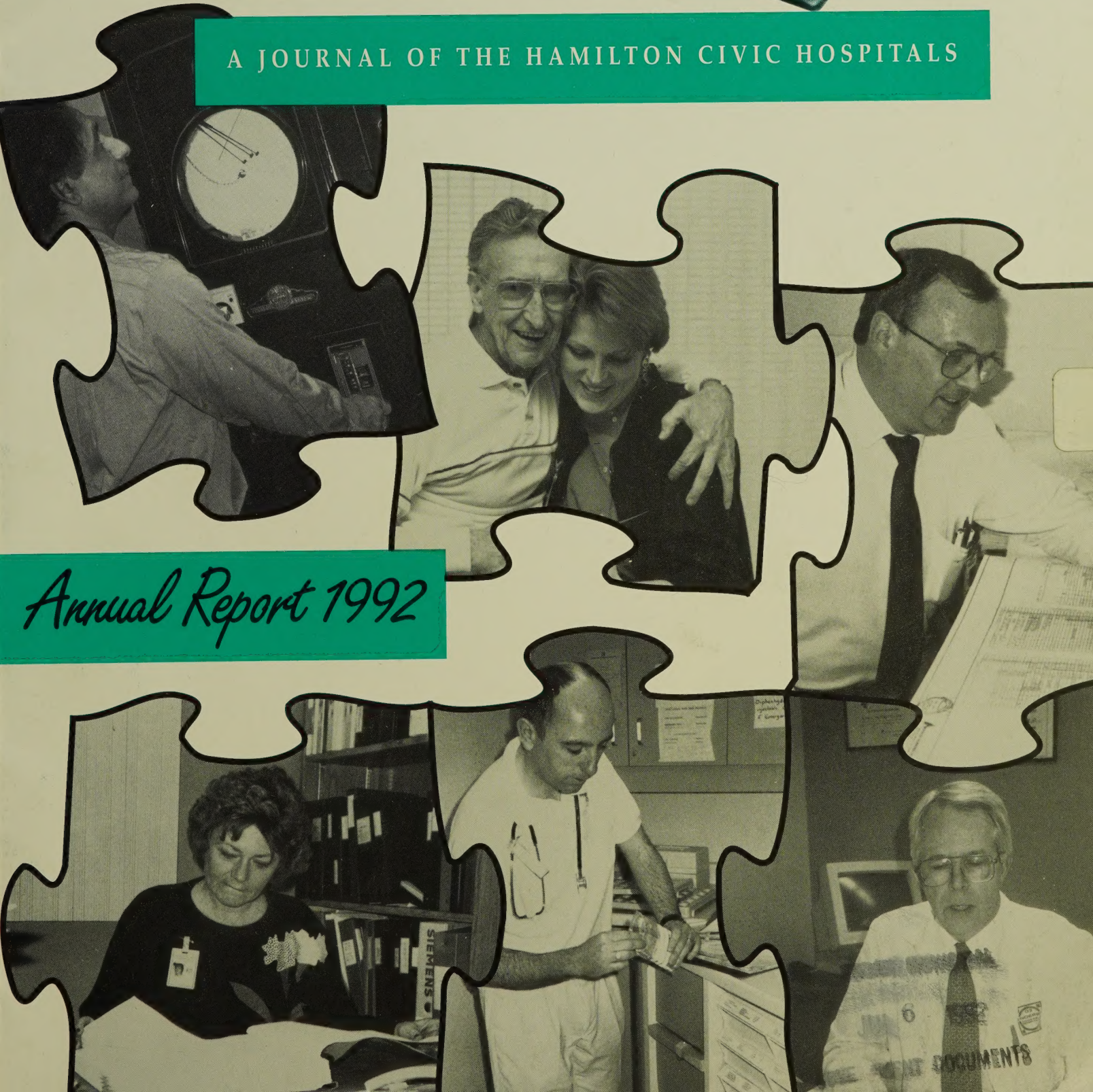
T54

1992

TOUCHSTONE

A JOURNAL OF THE HAMILTON CIVIC HOSPITALS

Annual Report 1992



Together... in caring, teaching and discovery

Touchstone is published quarterly by the Public Relations Department, Hamilton Civic Hospitals, 237 Barton Street East, Hamilton, Ontario L8L 2X2.

The Hamilton Civic Hospitals comprises two divisions: Henderson General and Hamilton General.

Chairman of the Board:

Mr. G. Lawson

President & Chief Executive Officer:

Dr. W. E. Noonan

**Director, Public Relations & Editor,
Touchstone:**

Ms. F. O'Flynn

Editorial Advisory Committee:

Mr. R. Swenor (Chair),
Mr. C. Waxman (Vice-Chair),
Ms. D. Drascic, Dr. F. Fraser,
Dr. J. M. Phin, Dr. M. McQueen,
Dr. A. Turpie, Dr. K. Ockenden

Design:

Falco Designs

Cover Concept:

Mr. Philip Homerski

Production:

Seldon Printing Limited

Research/Copy Editor:

Ms. Susanne Zelitt

Photography & Illustration:

- Audio-Visual Department
Hamilton Civic Hospitals
- Mr. Philip Homerski
- Mrs. Pati Greenwood

Interviewers/Writers:

- Mr. Philip Homerski
- Mrs. Noel Robb

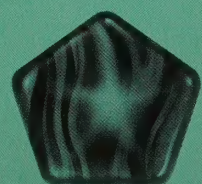
Anyone is welcome to reproduce articles from **Touchstone**. We would appreciate credit, however.

Please contact us with suggestions, comments or additions to our mailing list at (416) 577-8001.



A Touchstone is "a kind of stone used for testing the fineness of gold and silver . . . hence a standard for testing quality". To us, Touchstone connotes a sense of excellence, innovation and dedication, plus a feeling of warmth and caring. These five elements — symbolized by the five-sided touchstone to the right — are central to all our activities at the Civics; they are our standards and this is what we want our journal to reflect.

Editor



Contents



2

EDITOR'S COMMENT

3

RESTRAINT

7

A SPIRIT OF FAMILY

12

FRIENDS OF THE CIVICS

An investment in our people

Annual Report

13

BOARD OF DIRECTORS

Hamilton Civic Hospitals

14

REPORTS

20

FINANCIAL STATEMENTS

23

STATISTICS

24

MEDICAL STAFF ADVISORY COMMITTEE

COVER: Contributing to the whole: The spirit of cooperation between employees, Medical and Nursing Staff, administration and the Board of Directors is the Hospitals present strength and our hope for the future.

URBAN MUNICIPAL

JUL 6 1992

GOVERNMENT DOCUMENTS

Editor's Comment

"This was a year of changes and challenges. And in facing these we've found ourselves overwhelmingly grateful for the history of cooperation that exists between employees, the Board of Directors, administration, medical and nursing staff and volunteers of the Hamilton Civic Hospitals. It is this cooperation that has been our strength in the past and our support in the present. It remains our hope for the future..."

The quote, from this year's Annual Report message by Board Chairman Gordon Lawson and President and CEO Dr. William Noonan, highlights the spirit of cooperation which exists and has existed for many years at the Hamilton Civic Hospitals.

Some call it a spirit of family; others talk about the contributions made by our long-service employees and volunteers; and grateful patients still send letters and cards to staff years after their hospital stays.

Now, however there is a threat to this spirit. Despite the best efforts by many people, the hospital has had to embark on the first large-scale employee layoff in history. Those who have left remain in our thoughts; we hope, as positions become available through attrition, to be able to call back some of these employees.

For those who remain - the survivors - it is difficult. There remains a legacy of guilt, perhaps bitterness, maybe anger. What has been done is not easy, no matter how fair we believe the process to have been. Every member of staff has been touched in some way. Yet, as Dr. Bill Pine, Chairman of

the Medical Staff Advisory Committee, points out in his annual message, our patients have not felt the impact of this upheaval.

Dr. Pine notes: *"The Medical Staff are fully aware of the strains felt by all Hospital personnel. We appreciate the efforts required to achieve the fiscal targets imposed by the Ministry. We are also genuinely amazed that so much has been achieved fiscally while at the same time the high standards of patient care have been maintained."*

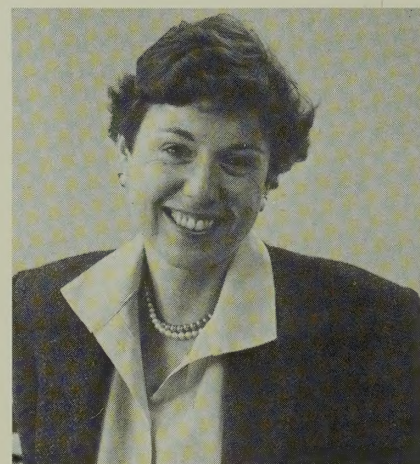
He concludes: *"The patients treated at the Civics have been spared the trauma felt by the staff. It is a tribute to the professionalism and dedication of the staff."*

Next year may be the most important in our history. Because next year we will have to put the unhappiness behind us and remember the spirit of cooperation that made us special. Dr. Pine says: *"It is reassuring to know that the Administration and the Board of Directors of the Civic Hospitals are committed to consultation and consensus achievement with Hospital medical and non-medical staff during the planning process. The future will bring changes but they will be informed and reasoned changes."*

Cooperation will make it so. As Dr. Noonan and Mr. Lawson say: *"It remains our hope for the future."*

* * * * *

We, in the Public Relations Department, are faced with our own changes, some of which will be felt by you, our Touchstone readers.



Early in the process of developing our response to restraints, we identified a need for change. We felt we must devote additional resources to internal communications - communicating with the survivors. At the same time, we had to make major cuts in our budget. The conclusion was inescapable. We would have to reduce the resources now devoted to Touchstone. The decision was made to publish only one issue a year - the Annual Report issue.

We hope this decision can be reversed at some time in the future. In the meantime, we will have to find some innovative, cost-effective ways to communicate with our community other than through Touchstone.

My thanks to all our readers, many of whom have shared story ideas and suggestions with me. I'd also like to thank the Editorial Advisory Committee for their invaluable support.

Until next year...

Frances O'Flynn,
Editor

Restraint

Throughout the period in which the Hamilton Civic Hospitals developed its response to the provincial government's funding restraint, administration worked hard at trying to keep staff informed of the direction this response was taking.

After the restraint program was accepted by the Board of Directors on March 26, we felt it was important, in keeping with our policy of communication and with the benefit of hindsight, to examine the process and to summarize developments for our staff.

Public Relations Assistant Director Philip Homerski assumed the task of pulling together a special issue of the employee publication, Link. Although this does have some outside circulation, we felt we would like to disseminate it further, partly because it describes the process we went through, and partly because we wanted you to know how we were communicating this process to our staff.

Following is the result of Phil's efforts, shortened slightly for reasons of space.



Premier's announcement deals blow to Civics

Stories by Philip Homerski

Since Premier Bob Rae's televised speech in January, health care workers across Ontario have anxiously awaited announcements from their employers on how they will be impacted by budget restrictions. The Premier had set the tone for cutbacks in health care - hospital administrators warned of drastic budget cuts, unions predicted a blow to the workforce, and workers were braced for the worst.

At Hamilton Civic Hospitals, staff members responded to the air of impending doom with a characteristic sense of teamwork to help maintain the quality of care our community expects.

Administrators requested the help of all staff members to identify possible cost savings in all areas of the hospital. The response was phenomenal. A planning committee, with representatives from Medical and Nursing staff and Administration, developed recommendations. These became an Operating Plan for 1992-93 which was then approved by a number of committees including the Medical Staff Advisory Committee.

While the recommendations were being developed and indications that some ward closures would be necessary, affected staff were kept informed. This allowed staff in

areas that might be affected by bed cuts to apply for vacant positions. (Some staff positions have remained vacant since the hiring freeze of November, 1991.)

On Thursday, March 26, the Board of Directors was presented with the Operating Plan for 1992-93. The Board voted to accept these recommendations. Immediately after the meeting, unions and staff of the Hamilton Civic Hospitals received official word of cutbacks.

In this issue of The Link, we take a close look at the details of the announcement, how the decisions were made and what it means to employees of the Hospital.

Where did the recommendations come from?

A great deal of work has been put into coming up with a plan to help the Hamilton Civic Hospitals deal with a projected budget shortfall of \$10 million. To address the problem, a team of doctors, senior nursing personnel and administrators got together to investigate alternatives and work on suggestions.

Says Dr. Ken Ockenden, Chief of the Department of Emergency Care, who chaired the Joint Planning Subcommittee: "For many years now, the Medical Staff Advisory Committee has had a number of committees charged with examining our utilization of hospital resources to make it more efficient. So in a way this has been an ongoing process. With the announcement of funding restraints, however, we needed to move quickly and synthesize all the work that was done in the past. We needed to look at the big picture. And we needed to incorporate recent input from Hospital staff.

"In a very short time, we analyzed every segment of the Hamilton Civic Hospitals. We were making some hard decisions, but we had cooperation from everyone we dealt with. In the final analysis, our bottom line was to live within our budget constraints while at the same time offering the same or better quality of care to the community."

Civics prepared for funding cuts

Although the announcement of reduced government funding prompted criticism from health care associations and hospital executives across Ontario, most were already prepared to face the reality of smaller operating budgets.

Hamilton Civic Hospitals' Vice-President, Finance and Corporate Affairs, Dave Watts says that for some time there were strong indications from the Ministry of Health that there could be restraints in funding to hospitals. He says that well before Premier Rae's announcement, reports from Ministry committees indicated that the Ministry of Health was establishing a direction toward tighter fiscal policies, "It was evident that by late summer (1991) the message we were getting was that funding could be well below what's necessary."

Ontario Hospital Association figures indicated that Ontario hospitals were going to need an increase of more than seven per cent in their budgets to maintain the level of health care.

By December it was evident that the Ministry of Health was looking not only at a figure much lower than seven per cent but there was a distinct possibility of there being no increase at all to hospital operating budgets for 1992-93. By this time, the Hamilton Civic Hospitals had already taken action to anticipate a smaller funding increase; a hiring freeze was put in effect in November, 1991, and Hospital officials began drafting projections of the impact of funding restrictions.

To the Civic Hospitals, the Premier's announcement of a one per cent increase in funding to Ontario Hospitals in 1992-93 put an end to speculation. The financial experts were then able to accurately figure out the shortfall and predict the impact on certain services. Special committees were struck and all Hospital staff began to get involved in identifying cost saving measures. An early retirement package was offered to more than 200 employees age 55 and over, with at least 10 years service. Salaries of executive, management, supervisory and non-union staff were frozen.

Joint Planning Subcommittee Members

Dr. K. Ockenden (Chair) - Chief, Department of Emergency Care
Dr. I. Blackstone - Head of Service of Orthopedics and Fractures
Miss M. Charters - Assistant Administrator, Nursing and Patient Care, Hamilton General Division
Dr. G. Dunn - Chief, Department of Anesthesia
Mrs. T. Fee - Vice-President and Chief Operating Officer, Hamilton General Division
Dr. J. Gunstensen - Chief, Department of Surgery
Dr. E. Isbister - Head of Service of Urology
Mr. P. Johnson - Vice-President and Chief Operating Officer, Henderson General Division
Mrs. P. Mandy - Director of Nursing, Henderson General Division
Dr. D. Pond - Chief, Department of Obstetrics and Gynecology
Dr. T. Seaton - Chief, Department of Medicine
Dr. B. Vedelago - Chief, Department of General Practice
Dr. M. Romeo - Chief, Department of Diagnostic Radiology, Hamilton General Division.

Salary costs still a concern

Salaries and benefits represent the major portion of a hospital's operating expenses. At the Hamilton Civic Hospitals, more than 70 per cent of the budget is spent on salaries and benefits.

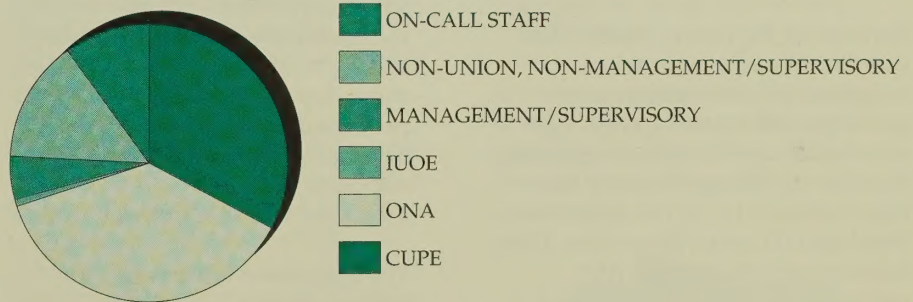
In the course of a year, the Hospital is involved in a number of bargaining sessions with unions at provincial and local levels. Because not all of these agreements expire at the same time, the Hospital is obliged to honor agreements made before the government's funding cut announcement. The overall effect of the wage agreements is likely to cause a major impact on future operating budgets; Hospital salary costs are estimated to rise by more than four per cent this year.

With salaries representing such a major portion of a hospital's operating expenses, hospitals will face greater restraints on wage increases and tougher bargaining for contract settlements.

In addition to wage settlements, the Hospitals' salary budget is affected by other outside factors. The Hospital must provide an extra one per cent of the payroll budget to fund the as yet unsettled pay equity adjustments.

Who makes up the health care team at Hamilton Civic Hospitals?

CUPE.....	33%
Ancillary and support staff including housekeepers, porters, X-ray technologists, lab technologists, RNA's, etc.	
ONA.....	37%
Registered Nurses	
IUOE.....	1%
Power and Maintenance engineers	
Management/Supervisory	5%
Administrators, department heads, nurse managers	
Non-union, non-management/supervisory.....	14%
Clerks, social workers, pharmacists, physiotherapists, etc.	
On-call staff.....	10%



How does reduced funding affect you?

On March 26, 1992, the Board of Directors of Hamilton Civic Hospitals approved a 1992-93 Operating Plan which expresses the organization's commitment to maintain quality patient care in meeting regional and community needs.

Unfortunately, there remains a need to close 124 beds (61 of which were unused in 1991-92 due to renovations and lower occupancy rates). This will result in the layoff of up to 100 union and non-union, full and part-time staff. Staff will be offered out-placement counselling and laid off staff will be called back first if jobs become available. Hamilton hospitals also will set up a data bank of laid off employees with a view to re-employment as positions become available at these hospitals.

Because of the hiring freeze, the number of employees who accepted the early retirement package, and an unusually high number of normal retirements, the number of potential layoffs has been reduced by 50 per cent. Vice-President, Human Resources, Peter Schmitt says that of the 100* people who are likely to be laid off, more than 30 could find temporary placement at the Hospital as vacation relief or as replacements for staff on maternity leave.

Indefinite layoff notices were posted on March 27. Union contracts stipulate that persons on this list have the opportunity of bumping less senior persons in similar categories provided that

they have the skill to fill the position. This process was expected to be completed by April 15.

"It is recognized that the next period of time will be a very difficult period for many employees, particularly the ones who will be directly affected by this change," says President and CEO, Dr. W. E. Noonan. "We regret every single layoff we will be forced to impose. For this reason, this Hospital has done everything possible to try to minimize the number of staff that will be affected."

As a result of the budget review, the Hamilton Civic Hospitals has needed to revise its principles of delivery of patient care while still meeting the needs of the community. They include:

- increased use of pre-operative clinics;
- same day surgical admissions;
- prompt discharge with appropriate links to community support;
- increased use of short stay units.

"The important issue is not the number of beds," comments Dr. Bill Pine, Chairman of the Medical Staff Advisory Committee. "It's whether we can provide quality patient care to the same number of patients we have traditionally seen. By applying these principles, which may take several months to fully implement, average length of stay will be reduced and we will make better use of the beds we have."

**As we went to press, 81 staff members were laid off and of these, 28 are being employed temporarily with the Hamilton Civic Hospitals.*

Family Spirit

86 years of service

"Institutions are something like the people they serve," wrote President and CEO Dr. W. E. Noonan, in a previous issue of Touchstone. "There is a conceiving and birth; an infancy and childhood which is in many ways a learning period; an adolescence and maturing, when strength is acquired along with maturity; and prime time, when major accomplishments are achieved."

In many ways, the employees who have been through the childhood, adolescence and prime time periods of the Hamilton Civic Hospitals - the institution's long-service employees - actually shaped the character of the organization. They established its traditions; they abided by its rules, or changed them; they learned; they acquired strength and maturity; and they achieved. They drew from the Hospitals and they gave back to the Hospitals.

Here we profile two long-serving employees who have contributed so much to the character of the organization in which they worked. Each explains, in her own voice, the way it was. And what made it special. It's an important message as we face this most challenging period in our history.



June Kelsey is an aide in the Housekeeping Department at the General Division, currently assigned to the Short Stay Unit. She recently celebrated her 45th anniversary of the day she started at the General.

**

I was 15 when I started on the Children's Ward. There were four or five of us who used to come in after school. Of that group, I'm the only one still here.

That was in the days when there were kitchens on the wards. There were four of us: a dish washer, a dryer and two to strip trays. I filled in, so I did a bit of everything. I particularly liked helping feed the little kids on the ward.

Do I remember any special children? I certainly do. Terry was eight years old and had polio. His leg was crippled but he used to help us gather up the trays. He always got into things. I remember one day he fell into the floor bucket and it took three of us to get him out.

The staff was a pretty close group in those days. We went to parties

together and gave showers for each other.

I first got to know my husband when I moved to ward 2. That was the women's ward. He brought the milk up and every time he came up, I'd run away. One day he put the milk cart across the door so I couldn't run. Three years later we got married. It will be 38 years this July.

My brother-in-law was the baker here and my sister worked here. I knew people throughout the hospital because, over the years, I worked in nearly every area except the critical care wards.

It was nice to watch the nurses go from their pink uniforms to their stripes. When they graduated we would watch them out in front of the Nurses Residence holding their roses. They were so proud and we were proud of them.

It's hard to explain why I've worked here for so long. I never did try for anything else. What I'm looking forward to now is my 50th anniversary.





Erna Ridley recently retired as a nurse in Henderson Division's Labour and Delivery after 41 years of service. She graduated from the Hamilton General Hospital School of Nursing, Class of 1951A. Her friends call her Ernie.

I had been a ward aide in St. Catharines while I was going to school. In those days, the Hamilton General School of Nursing was one of the best around, so when I decided I wanted to be a nurse, that's where I was told to go.

Miss Brewster was the Director of Nursing. I remember her telling us: "If you're looking for a social life, then you take a hike right down to American Can where they are hiring. Cans don't have feelings, patients do." Nursing was a profession then - and an art - not a job.

We lived in Winston Hall, right by the Silverwood Dairy and we used to wake up to the sounds of "c'mon Bessie" as the delivery vans headed out.

As probies, we wore caps which had to be cleaned and starched, black shoes and stockings and pink uniforms with no collars or cuffs. After five months, we were formally accepted and received collars and cuffs. We were told at that time, "You all have worked so well and are so capable. You deserve these." We were very proud of those uniforms and of ourselves. We got respect in those days, maybe because of the uniform.

We worked on the wards from 7 a.m. to 1 p.m., had classes from 2 p.m. to 4 p.m. and then worked on the wards again from 5 p.m. to 7 p.m. We also had to pay for every thermometer and medicine cup we broke. We didn't consider it 'slave labor' as some might say today. When I worked on peds on the second floor, there were all babies - sometimes as many as 25 - and often just two of us to look after them. We worked hard, but we enjoyed it.

We were a very close group. After all, you live and work with the same people for three years, you do get close. Whenever you got low, the kids were always there to pick you up. Actually we're still close. We've had a class reunion every year and the last one was three days long.

In those days we worked in teams of two: one did the medications and dressings; one did hands-on patient

care. Between us we could handle 16 patients. I remember (former Ancaster Mayor) Ann Sloat and I were just a terrific team. We looked like Mutt and Jeff - I was so short and she was so tall - but we just worked like a charm together. (Note: Ernie and Ann are pictured in the photo below, taken at Ernie's retirement tea.)

The Hospital was very good to us. They had a capping tea for us and invited our parents. And there were always the special people. Dr. Dingwall, I remember, treated staff cases on the pediatric wards; he treated those children as if they were his own. Miss Brewster had a special fund in her dresser drawer and she would provide a very sick child with a private nurse out of this fund.

What did I learn? A great deal. But I think it comes down to the fact that each patient is an individual and deserves to be treated as an individual. I've enjoyed what I've done and I feel lucky for this.



Family Spirit

How does one define "family spirit"? Of what elements is it composed?

The answers aren't easy. Certainly the contributions of long-term employees such as June Kelsey and Erna Ridley are part of it - ours is a history rich in traditions with people who met their spouses at the Hospitals and whose children and maybe even grandchildren now work here.

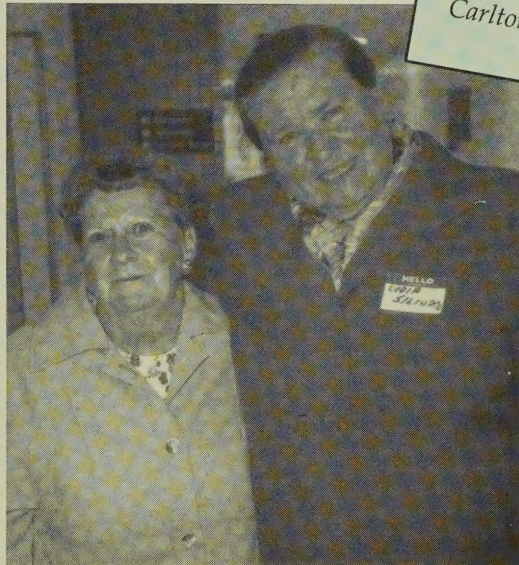
Or it may be as simple as being a good team member. On the ward and on the field. There are many employees who put in hours of their free time scheduling and planning to make the Hamilton Civic Hospitals sports teams what they are - keen competitors in inter-hospital and city leagues; people who want to make us winners in more ways than one.

On the other hand, it may be as complicated as staff who understand how to help a frightened patient or provide support to a grieving family - Caregivers who work in every department at both Divisions.

In the following three pages we've tried to tie down that elusive family feeling, using photos, letters from patients and poetry. Why? Because this is what has made us unique in the past. And this is what gives us hope for the future.

Then at last courage I'll summon,
Grasp it never to let go,
Though a virtue that's uncommon
When the tide of life is low,
It will help me to recover,
Stand up tall and face the fight,
Finding courage, I'll discover
That I'll never dread the night

From, *Courage, Where are You*,
included in a recently published
collection of poetry entitled *In Fields of
Dream*, written by Linda Brissett, a
nurse at Henderson Division.
Reprinted with permission from
Carlton Press, New York, N.Y., 1992.



Former roommates reunited. The Hamilton Civic Hospitals Foundation's Open House for heart surgery alumni had special meaning to Illa Jazvac (left) and Lydia Silinskis. Last year, the two shared a room while recovering from heart surgery. They became fast friends and have kept in touch by phone. However, because they live at opposite ends of town, it's sometimes difficult for them to get together. Says Lydia, "It's just wonderful to see her again," and the two promise to meet again when Lydia returns from a trip home to Estonia.

"The care and consideration I received in the Burn Unit at the (Hamilton General) Hospital is very much appreciated.

I have never seen nurses work so well (together) and (through) such teamwork do the job so well. And in such a pleasant manner. . .

*Mrs. Joyce Smithson
St. Catharines, Ontario*

Hamilton General is well equipped
And newly built as well
But its real worth lies in its staff
As its patients all can tell

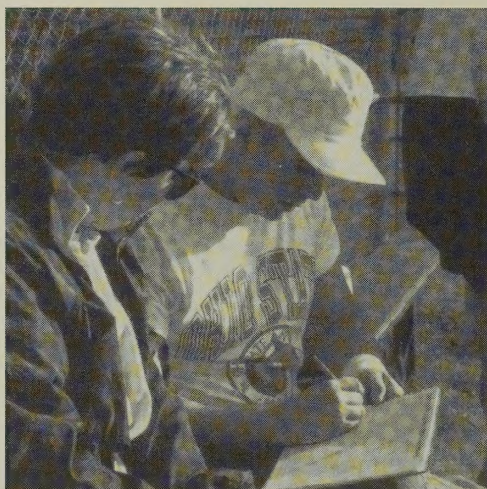
The orderlies and cleaners
Keep all the germs away,
Make sure this busy hospital
Keeps recovery underway

And the meals are served so tastefully
By the Barton Catering Crowd
That patients sometimes gain in weight
More pounds than are allowed!

The nurses and assistants
Provide a mother's touch
And ladle love with medicine
No effort is too much

The doctors with their special skills
And understanding, too,
Work with their teams to fulfill dreams
And bring back health anew

*Some verses from A Tribute to Hamilton
General Hospital, written by patient Alan
W.C. Tustin, Niagara Falls, Ontario.*



Filling out the score sheet. Leanne Durst and Doug Norris of Hamilton General Division's Diagnostic Imaging Department tally the score after the first game of the season for the Hamilton Civic Hospitals' Softball

League. Currently there are 20 teams in the league, made up of employees and friends of the Hamilton Civic Hospitals. Hospital teams participate in volleyball leagues, the annual Corporate Challenge and baseball. Then there are the Hamilton Civic Hospitals golfers, who play Tuesdays after work during the season (which as every avid golfer knows is February to November!) The sports teams are self-supporting and many employees put in many volunteer hours working out schedules and arranging locations.



The Hamilton Civic Hospitals Quarter Century Club was established in 1965 to recognize employees with long service to the Hospitals. There are now 516 members, 325 of whom gathered at the Royal Connaught Hotel on May 13, 1992, to reminisce and welcome 56 inductees. Here, a gathering of 35-year employees: (front from left) Dr. W. O. Jackson, Employees' Health Service, Hamilton General Division; Ms. Sarah Langthorne, RN, retired from Labour and Delivery at Henderson Division; Dr. W. E. Noonan, President and Chief Executive Officer, Hamilton Civic Hospitals. (back) Mr. Keith Walker, Porter, Pharmacy Department, Hamilton General Division; Mr. Bob Melville, Orderly, Operating Room, Hamilton General Division.



The Hamilton Civic Hospitals Volunteer Association was founded in 1921. In 1991, more than 160 active service volunteers (which includes 85 teen volunteers!) provided 36,424 hours of service at both Divisions. This year the Association contributed more than \$50,000 to each Division to be used for the purchase of much needed equipment. Here, volunteers attending the Annual Meeting enjoy each other's company and celebrate their hard work on behalf of the Hospitals.

"I wish to express my sincere 'Thanks' and 'Deep Appreciation' to the Staff of Ward 293 for the splendid care and careful attention afforded me during my stay in (Henderson) General Hospital.

The Doctors; the Nurses; the Cleaning Staff; the Orderlies and anyone who assisted in my care were most courteous and helpful and very much appreciated.

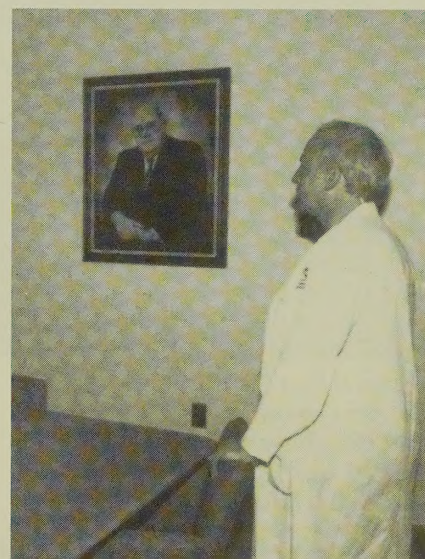
It was always a pleasure to have Nurse Tony (nicknamed 'The Humming Bird') come in to our room because no matter what she was doing she was always humming and that seemed to brighten the whole room up.

We could always depend on our meals being on time, and although not of great quantity, they were of good quality and quite fulfilling.

I sincerely hope and trust that the years ahead will hold nothing but success and betterment for the Staff of 293 and the Henderson General Hospital as a whole.

Again my sincere 'Thanks.' "

As ever,
Gordon K. Bone
Hamilton, Ontario



Dr. Michael Greenspan waits for the start of a meeting in the Dr. W. E. Noonan Medical Staff Conference Room located at the General Division. The room was recently dedicated to the President and CEO in recognition of his support to the Medical Staff. Medical Staff President, Dr. Abe Szereszewski, noted that their gift of Dr. Noonan's portrait and the dedication of the room was seen as a fitting way to honour Dr. Noonan's "outstanding work with the Medical Staff and the community over the past 35 years."

HCHF Awards program...An investment in our people

by Noel Robb

One of the most exciting new programs launched by the Foundation this year was the Hamilton Civic Hospitals Foundation Awards Program. Open to all departments, the program grants requests for items that may not have been covered under the hospitals' annual budget such as staff training, patient education, equipment and research projects.

Foundation Past President Norm Preece was instrumental in bringing this program into the hospitals. "Having been involved in controlling budgets for very large companies, I know it is very frustrating for staff who have a special project or idea and are unable to secure the funds through the traditional channels. We also realized that the hospital staff are our best resources for fundraising and that this would be an excellent way of making staff aware of the role of the Foundation. And it is

one way we can thank staff for their financial support."

Thirty-nine applications were received in the first call and 22 proposals totalling over \$28,000 were accepted. The requests ranged from staff training to the printing of a patient care booklet. All requests required the approval of administration before they were considered by the Foundation Board.

Suzette Salama, Clinical Coordinator, Pharmacy Department at the Henderson Division, was thrilled with the \$1,515 her department received for tuition for a Geriatric and Golden Years Conference. Important because 50 percent of her patients are older adults, this 13-week program enabled Suzette and five pharmacists to take the University of Alberta course through teleconference. The program also provides materials for workshops

A teleconference course on Pharmacy and the Golden years will help Suzette Salama and her group from Henderson's Pharmacy Department become aware of special medication needs of older adults. From left: Suzette Salama; Donna Ciccarelli; Adel Chehab; (standing) Eric Sham; Bosco Wong; Nur Parpia.

and case studies. Comments Suzette: "I was very happy to hear that our grant was approved. It is very gratifying to see this support for education, especially during these trying times. I hope that the Foundation will be able to continue offering this kind of incentive for the Civic Hospitals staff in the future."

The staff of the Civics has always been and continues to be our most important asset. This grant program is the Foundation's investment in our people.



FOUNDATION AWARDS

Judy Lever	Henderson	Nursing	Joann Rau	Henderson	Terrace
<i>Pilot Study - examine effect of policy of least restraint</i>			<i>Purchase of 30 purse size lockers for ward</i>		
Linda Hilts	General	Patient Education	Charlotte Daniels	General	Clinical Ethics Comm.
<i>To print - "Care" book</i>			<i>Travel and accomodation for guest Dr. Nuala Kenny</i>		
Joan McCrory	Henderson	Admitting	Dianne Kuwabara	General	5 South
<i>To attend 6th Annual Educational seminar for Admitting staff</i>			<i>To hold education workshop re: care of cardio. patients</i>		
Dr. Swapan K. Nath	Henderson	Laboratory Medicine	Dr. L. Elavathil	General	Laboratory Medicine
<i>Invasive Group A Streptococcal Study</i>			<i>Pilot Project - study potential prognostic factors in breast cancer</i>		
Suzette Salama	Henderson	Pharmacy	Donna Ciccarelli	Henderson	Pharmacy
<i>Funds for 5 pharmacists to attend a course</i>			<i>To copy 300 page text into OA system re: I.V. manual and edit monographs</i>		
Penny Preston	General	Nursing	Linda Churchward	Henderson	Occupational Therapy
<i>2 Group registrations for Critical Care '92</i>			& Becky Shular		
Brad Porter & Teresa Smith	General	Respiratory Therapy	<i>Purchase of one Hydraulic group treatment table</i>		
<i>Registration for Conference</i>			Candace Thacker	General	Medical Library
Ted Musgrove	General	Materials Management	<i>To get deposit account with National Research Council re: Medlars search fees</i>		
<i>1-day motivational/educational seminar</i>			Heather Harris	Henderson	Ward 497
Elizabeth Knuckle	Henderson	Social Services	<i>Furniture for patient sunroom</i>		
<i>Partial funding for seminar tuition cost</i>			Maureen Arnold	Henderson	Ward 592 (Orthopedics)
Anna Oliverio & Mena Billeci	Henderson	Rehab. (Wards 171-172)	<i>To attend Canadian Orthopedic Nurses Association's Annual Conference</i>		
<i>Training course on Fuctional Independent Measurement</i>			TOTAL ...		\$28,421



Board of Directors Hamilton Civic Hospitals

Seated from left, Mr. Chester Waxman, Past Chairman; Mrs. Harry Ruddell, President of the Hamilton Civic Hospitals Volunteer Association; Board Chairman, Mr. Gordon Lawson; Mrs. Trish Mongeon; Mr. John Spears, Second Vice-Chairman.

Standing from left, Dr. Abe Szereszewski, President of Medical Staff; Mr. Norm Corfe; Mr. Morris Smurlick, Secretary; Mr. Norm Preece; Mr. Doug Boothe; Dr. W. E. Noonan; Mr. John Skirving; Dr. Bill Pine, Chairman of MSAC.

Missing: Regional Councillor Domenic Agostino; Regional Councillor Don Drury; Alderman Henry Merling (Mayor's Designate); Alderman Bernie Morelli; Miss Joyce Caygill; Dr. A. A. Cividino, Vice-President of Medical Staff; Ms. Renate Davidson; Dr. Barry Lumb, President of Medical Staff; Ms. Cheryl Robertson; Mr. Stan Seneco; Dr. Iain Stewart, First Vice-Chairman; Mr. Robert Swenor.

Hamilton Civic Hospitals

In reviewing the events and activities of the past year, a theme emerges. As the reports from the Chief Operating Officers, the Volunteer Association President and the Chairman of the Medical Staff Advisory Committee have all stressed, this was a year of changes and challenges. And in facing these we've found ourselves overwhelmingly grateful for the history of cooperation that exists between employees, the Board of Directors, administration, medical and nursing staff and volunteers of the Hamilton Civic Hospitals. It is this cooperation that has been our strength in the past and our support in the present. It remains our hope for the future.

Nowhere was this spirit of cooperation more evident than in shaping our response to funding restraints announced by the provincial treasury earlier this year. The very difficult decisions that had to be made were made with input from all levels. Medical staff played a key role in developing the recommendation, with support from administration. Department heads, nursing staff and employees at both divisions had input during all phases of the process and as recommendations were developed they were communicated to those staff members who would be affected by them. The final draft document, the 1992/93 Operating Plan, was approved by the Medical Staff Advisory Committee and committees which included representatives from the Board, administration, professional staff and employees. Ultimately the Board of Directors had the final responsibility for approving the

plan, which they did on March 26, 1992.

From the beginning, the restraint program was designed to minimize the impact on the community we serve by changing patterns of practice. Committed to providing the same high quality of care to the same number of patients (after an initial transition period) the program focuses on efficiencies achieved by shorter length of stay; higher average occupancy rates on nursing units that remain open and an increase in day surgery. The plan will be monitored throughout the year, not only to ensure that budgetary objectives are met but that the quality of patient care is not compromised.

At the same time, the restraint plan has attempted to effect the maximum savings from non-human resources to minimize the impact on our labor force. From November 1991, we delayed filling vacant positions; we also offered an early retirement package this spring. The resulting vacancies offset some of the required layoffs. In all, though a total of 217 jobs were eliminated, the number of layoffs was reduced to 99, thirty-six of which were part-time employees. At the time of writing this, the number actually laid off was further reduced to 81 as the Human Resources Department continues to seek places for displaced workers; some employees, for example, have been placed as a result of increased activity related to the new Hamilton Regional Cancer Centre. As well, Hamilton hospitals have put together a joint roster of laid off workers to attempt to fill from

this list vacancies that may occur at any institution.

At this point, we would like to thank everyone who played a role in developing this response. It was the thousands of hours of extra work on the part of hundreds of people that resulted in what we believe is a good workable program. While it may be unfair to single out any individuals, we would be sorry not to mention the vital role played by the Joint Planning Subcommittee, chaired by Dr. Ken Ockenden and the very important contributions made by Vice-President of Finance and Corporate Services, Mr. Dave Watts; the Chief Operating Officers, Mrs. Trixie Fee and Mr. Peter Johnson; Vice-President of Human Resources, Mr. Peter Schmitt and Vice-President of Medical Affairs, Dr. John Phin.

While the end of this fiscal year saw us very occupied with responding to funding restraints, there were a number of other important developments that took place throughout the year.

Changes to the Board of Directors included the resignation for health reasons of Miss Joan McKee and the completion of term for Ms. Mary Hofstetter; we appreciate the involvement these individuals had with the Hospitals and thank them for their dedicated service. Mrs. Trish Mongeon, who headed the Maternity fundraising campaign, was appointed member at large and is a welcome addition to the Board. At the end of the fiscal year, there remained an additional member-at-large position to be filled.

Our municipal representatives have changed as well: Mr. Tom Murray is replaced by Councillor Domenic Agostino; Mr. Henry Merling has become the designate representing Mayor Bob Morrow; and Alderman Bernie Morelli now represents the City. We look forward to working with the new municipal representatives and thank the previous members for their help and support.

Important senior personnel changes occurred in the past year. Dr. George Woodward, who served as Vice-President and Chief Operating Officer of the Hamilton General Division, retired after more than a quarter century of service, and Mrs. Trixie Fee, formerly Associate Administrator at Henderson Division, succeeded him as the General's Vice-President and C.O.O. Ms. Colleen Geiger, formerly Director of Special Projects then Assistant Administrator at Henderson Division, became Associate Administrator of Hamilton General Division. Mr. Lloyd Koch, Associate Administrator at Henderson Division, left the Hospitals for a position in private industry and was succeeded by Mr. Paul Gorys, who was recruited from the Ministry of Health.

Physical plant improvements continued during the year. At the Henderson General Division, construction began on the new Concession Street parking ramp to double the previous capacity. Phase 2 of the Hamilton General Redevelopment was completed. An official opening and dedication

ceremony was held for the new Ronald K. Fraser Foundation research laboratory at the Hamilton General. The year also was the completion of a Henderson project, funded by a Hamilton Civic Hospitals Foundation fund-raising campaign and the Ministry of Health, to install air-handling equipment and renovate the Maternity ward. Two major renovation projects supported by the Ministry of Health were also initiated at Henderson. At the end of the fiscal year, the new Hamilton Regional Cancer Centre was nearing completion.

At the Henderson Division, in-patient Psychiatric services were consolidated and Ward 39 at Hamilton General was closed. A day Psychiatric Program was initiated and it is expected that between the in-patient unit at the Henderson and the day program, the Hamilton Civic Hospitals will continue to handle the same patient volume as previously.

At Hamilton General Division, the Regional Trauma Program and Registry was more formally established. The Cardiac Care Clinic - involved with pre- and post-operative follow-up, lifestyle modifications and rehabilitation of heart patients - was established by special funding from the Ministry of Health at the General and occupies rental space in the Wellington Medical Centre.

The Hamilton Civic Hospitals was pleased to receive a three-year accreditation from the Canadian

Council of Health Facilities Accreditation.

There are many people who have made special contribution outside the Hospital but we would like to take particular note of Mrs. Pat Mandy, Director of Nursing at Henderson, who was elected President of the College of Nurses of Ontario; Mr. Peter Johnson, Vice-President and Chief Operating Officer at Henderson, who was asked to serve a second term as director of the Hospital and Health Care Sector of the United Way; and Ms. Susan Lennox, Director of Social Work at Henderson, who participated as our representative in the Loaned Executive Program of the United Way last year.

As we mentioned at the beginning of this report, we are particularly grateful for the historic cooperation that has existed in the Hamilton Civic Hospitals. It is particularly now, during challenging times, that these past ties strengthen us. We would like to thank our staff; the Medical Staff and its Medical Advisory Committee under the Chairmanship of Dr. Bill Pine; The Hamilton Civic Hospitals Foundation under President Mr. Jim Coons and Executive Director Mr. Michael Farrell; the Hamilton Civic Hospitals Volunteer Association under its President Mrs. Harry Ruddell; the senior administrative group and the Board of Directors. Together we look to the future with strength and confidence.

Mr. Gordon Lawson
Chairman
Board of Directors

Dr. W. E. Noonan
President and
Chief Executive Officer

Hamilton General Division

It has been a year of many changes at the Hamilton General Division.

In July, 1991, we bid a fond farewell to Dr. E. George Woodward who retired as Vice-President and Chief Operating Officer after more than 25 years of service.

In February, 1992, the Hamilton General Redevelopment project was finally completed with the opening of the Research Laboratories, dedicated to the Ronald K. Fraser Foundation.

Our Cardiac Care Program continued to flourish: 846 open-heart cases and 2,453 cardiac catheterizations were performed. We were delighted by the decision of the Ministry of Health to fund as a three-year pilot project - the first of its kind in the province - our innovative pre- and post-operative outpatient clinic for cardiac surgery patients. The clinic

was opened under the leadership of Dr. Bill Shragge and Mrs. Charlotte Daniels in the Wellington Medical Centre in February, 1992.

The Trauma program was also enhanced with the establishment of a Regional Trauma Registry at the Hamilton General Division, and the appointment of Dr. Frank Baillie as Coordinator of the Regional Trauma Program.

In January, 1992, with the confirmation from the Ministry that funding levels for health care will be significantly curtailed over the next three years, we were quickly forced to rise to the challenge of downsizing. This has been a collaborative effort by all levels of staff and medical staff, involving a critical appraisal of all aspects of our operations in pursuit of potential cost savings and efficiency improvement.

In spite of the unfortunate realities of bed closures and staff reductions which will ensue in 92/93, we will move forward, united in our commitment not to compromise the quality or quantity of the patient care we deliver.

In closing, we extend our sincerest thanks to all those who have worked to enable the Hamilton General Division to maintain its high standards of performance during these difficult times - the staff, medical staff, board members, volunteers, and patients. Your tremendous and ongoing efforts are greatly appreciated.

Mrs. Trixie Fee
Vice-President
Hamilton Civic Hospitals
Chief Operating Officer
Hamilton General Division

Henderson General Division

The past year was one of change, continued progress and successful response to challenge for the Henderson Division.

In November, 1991, the Canadian Council on Health Facilities Accreditation surveyed the Hospitals and awarded three-year Accreditation status. This three-year award is a significant achievement which recognizes the high standards of care provided at the Hamilton Civic Hospitals.

Funding restraints announced by the Ministry of Health in February, 1992, presented a major challenge. However, the positive response and collaborative planning efforts by the entire hospital team were admirable. We believe we are now positioned to operate within the new financial climate, while at the same time, maintaining the high service levels and quality patient care reflected in our Accreditation award.

Construction of the Hamilton Regional Cancer Centre progresses steadily throughout the year, as did our plans to respond to the increased patient activity generated by the new Centre. As the Henderson Division is the host hospital for the Cancer Centre, oncology continues to be a major focus of service and support for us. The computerized tomography suite in our Radiology Department, for example, is used extensively by patients with oncology related disease. A mammography suite also has been

constructed and equipped with the most advanced systems available for early detection of breast cancer. And for the convenience of Cancer Centre patients, the Henderson is also planning to operate satellite Radiology and Laboratory Departments in the new Centre.

Construction began on the new Concession Street parking ramp which, when completed in October 1992, will double the parking capacity of the Henderson Division and help relieve the chronic parking shortage currently experienced by our patients and staff. Other major renovation projects included the long overdue installation of air handling in the Maternity Wards and the start of major alterations to our Neonatal Unit. Final plans are also underway for the construction of a research and materials management building.

The final phase in consolidation of the Department of Psychiatry was completed during 1991/92 as in-patient services moved to their permanent location on Ward 375. The out-patient Psychiatry Clinic completed a successful first year on the Henderson site and introduced a new program for Workers Compensation Board patients.

This past year saw a considerable number of administrative and medical changes as we said goodbye to Mr. Lloyd Koch, Associate Administrator, and Dr. William Hyrniuk, Chief Executive

Officer of the Hamilton Regional Cancer Centre. Dr. Ken Lamont resigned as Chief of Obstetrics/Gynecology; Dr. Graham Thomson as Chief of Radiology and Dr. Ralph Bloch as Chief of Rehabilitation Services. Twenty-nine members of the Henderson Division staff retired; together their years of service totalled an astonishing 641 years. I extend my thanks and appreciation and wish each of them every success in future endeavors.

New faces include Dr. Donald Pond, Chief of Obstetrics/Gynecology; Dr. Terry Minuk, Chief of Radiology; Dr. David Harvey, Chief of Rehabilitation Services and Dr. Penny Thomson, Director of Nurseries. We also welcome Mr. Paul Gorys, who joined us from the Ministry of Health, as Associate Administrator.

My annual report would not be complete without special reference to the continued support we receive from our Volunteer Association. Again I extend my personal thanks for the donation of your time and energy for the well-being of our patients and support of our staff.

Mr. Peter Johnson
Vice-President
Hamilton Civic Hospitals
Chief Operating Officer,
Henderson General Division

Medical Staff Advisory Committee

In preparing to write this report I re-read what I had written last year and the annual reports of previous Chairs of the Medical Staff Advisory Committee. I was struck by how similar they were - summaries of development, growth and change. Thinking at the time that this would continue in the future, I was quite unaware how prophetic the final words in my last year's report would be when I wrote...

"The past year had been one of completion of many projects and renewal. We look forward eagerly to the coming year in which we will be able to build upon the successes so recently achieved. It's an exciting time to be part of the Hamilton Civic Hospitals."

Suddenly, and with an impossibly short lead time imposed by the Ministry of Health, a change, much greater than the Medical Staff could have imagined, was demanded by Government. Exciting? Yes. But it also has been a difficult year for staff and Medical Staff. It has meant a rapid re-examination of all aspects of our hospital life, of how we do business.

The Civics ultimately decided on budget adjustments through closing 13 percent of our beds and making an appreciable and sizeable staff layoff. This was traumatic particularly for those whose positions were lost. But these are also people with whom members of the Medical Staff worked on a daily basis. It has been a personal loss to us as well. It drove home the magnitude of the problem that, while quality must not be allowed to diminish, care must be more effectively and economically delivered.

Understandably morale was damaged. It is only now that

recovery has begun. This recovery is also affected by the question of what lies ahead in terms of further reductions if care is not significantly changed.

The Medical Staff are fully aware of the strains felt by all Hospital personnel. We appreciate the efforts required to achieve the fiscal targets imposed by the Ministry. We are also genuinely amazed that so much has been achieved fiscally while at the same time the high standards of patient care have been maintained. The patients treated at the Civics have been spared the trauma felt by the staff. It is a tribute to the professionalism and dedication of the staff.

The leadership of the Medical Staff in its various committees is committed to new forms of practice, shorter stay for patients, more coordination with community resources and even more fine tuning of rationalization among the Region's institutions. Ultimately it leads to change - something that none of us - as humans - accomplish easily. However, we have a firm mature working relationship with the Hospitals' Board and Management. Without this the changes of the magnitude we envision would be impossible. With the mutual respect we have developed over the past the changes can be made.

Do the changes in financing over the past year mean that this has been a year devoid of growth and completion of projects? No. As in past reports, there is a long list of achievements that are reported on elsewhere in the annual reports.

Research and education responsibilities have continued to advance. The Cardiovascular Program more than met the targets

set. The Adult Trauma Program has been re-organized and will soon achieve the recognition at a provincial level that it so well deserves. The new Cancer Centre is about to have its official opening. Pre-eminent among our achievements in the past year has been the maturing of the Research Centre under Dr. Jack Hirsh's direction. Research activity throughout the organization continues to blossom and the growth of the Research Centre, including the opening of research laboratory facilities at the Hamilton General Division, reveals again the foresight and wisdom which led to the Centre's creation.

It is clear that hospital funding will be constrained for the foreseeable future as the Ministry redefines its spending objectives. It is, therefore, imperative that ongoing planning be a priority with the Hospitals. Over time, the regional planning initiatives will more clearly define our responsibilities for health care with the Region. It is reassuring to know that the Administration and the Board of Directors of the Civic Hospitals are committed to consultation and consensus achievement with Hospital medical and non-medical staff during the planning process. The future will bring changes but they will be informed and reasoned changes.

The successes I referred to last year are not only success of program development but, more importantly, success in developing relationships on which the future of the Hospitals will be based.

W. Pine, MD, FRCPC
Chairman
Medical Staff Advisory Committee
Hamilton Civic Hospitals

Hamilton Civic Hospitals Volunteer Association

This has been another busy and rewarding year for the Volunteer Association, as everyone continued to give of their time and talents and, most importantly, themselves. Their devotion to their volunteer jobs is truly inspiring.

Last year we paid off our million dollar pledge to the Hamilton Civic Hospitals Foundation's Five-Star Generals Capital Campaign! As well, we presented \$100,000 to the Maternity Campaign at Henderson Division and made a new pledge of \$100,000 a year for five years to the Foundation's Mend a Broken Heart Campaign. And, particularly important in these hard times, we continued to donate funds to be used for equipment purchases at both Divisions. This year, each Division was able to purchase \$50,000 worth of equipment.

We continue to make money from our five shops: the snack bar and the gift shop at Hamilton General, and the snack bar, gift shop and maternity shop at Henderson Division. The Nevada lottery, introduced to our Hospitals by a former President Miss Mary Gibbon, continues to be our big fundraiser.

Over the year, we have also held sales of jewellery and uniforms plus art shows and sales, raffles and of course, the Fall Fair. This year we received several donations, which were very much appreciated. A large stuffed tiger was given to us to raffle and we made \$972. And the Hamilton Community Credit Union gave us \$1,100. We thank our donors for their thoughtfulness and generosity.

It's nice to see how many volunteers participate in our events. Last June, about 200 attended a tea held at the home of Mr. & Mrs. Tom Langs. The volunteer recognition lunches held in the spring at the General and the fall at Henderson also have been well attended, and like the tea, much enjoyed by all.

Last Christmas, volunteers donated and decorated an eight-foot tree for the lobby of the General Division; it was lovely and could be seen from outdoors through the full-length glass windows. We were glad to see the joy and cheer it provided to patients, staff and visitors.

One of our Board members, Mrs. June Charters, made us all very

proud by becoming a life member at the Hospital Auxiliaries Association of Ontario Convention last November. She joins the two other life members on our Board, Mrs. Nancy Gorman and Mrs. Verdun Armstrong.

We had two volunteer candidates for Volunteer of the Year. Mr. Doug Bell was nominated by Mrs. Aileen Rowell, Director of Volunteers at Henderson General, and Mrs. Mary Lang was nominated by Mrs. Jane Marusiak, Director of Volunteers at Hamilton General. We didn't win this year, but Doug was honoured by the Sertoma Club of Hamilton and presented with their award for humanitarian service to the community.

We are very proud of all our volunteers, for each one contributes so much to the welfare of patients and staff. And as we face the challenges ahead, we will continue to build on the traditions of the past to adapt for continued success in the future.

Madelyn Ruddell (Mrs. H)
President,
Hamilton Civic Hospitals
Volunteer Association

Financial Statements

Balance Sheet as at March 31, 1992

Assets

	1992	1991
Cash and Investments	\$20,025,063	\$ 13,618,012
Grants and Accounts Receivable	17,809,984	16,681,617
Inventories	4,626,302	4,448,059
Prepaid Expenses	470,422	1,317,651
Total Current Assets	42,931,771	36,065,339
Fixed Assets -		
Equipment.....	63,050,098	59,020,578
Less Accumulated Depreciation	38,605,205	34,047,262
	24,444,893	24,973,316
Construction in Progress	134,870	—
	24,579,763	24,973,316
Total Operating Fund Assets	67,511,534	61,038,655

Liabilities and Fund Balances

Operating Fund

	1992	1991
Accounts Payable and Accrued Liabilities	\$40,380,909	\$ 31,079,013
Due to Redevelopment Fund	—	1,072,960
Total Current Liabilities	40,380,909	32,151,973
Operating Fund Balance	27,130,625	28,886,682
Total Liabilities and Operating Fund Balance	67,511,534	61,038,655

Redevelopment Fund (Note 2)

Due From Operating Fund	—	1,072,960	Holdbacks Payable	—	1,072,960
Construction in Progress	—	67,884,140	Redevelopment Fund Balance	—	67,884,140
Total Redevelopment Fund Assets	—	68,957,100	Total Liabilities and Redevelopment Fund Balance	—	68,957,100
Total Assets	\$67,511,534	\$129,995,755	Total Liabilities and Fund Balance	\$67,511,534	\$129,995,755

Notes to Financial Statements - see page 22

Statement of Changes in Financial Position

for the year ended March 31, 1992

Sources of Working Capital	1992	1991
Surplus for the year	\$2,384,482	\$6,485,973
Charges to operations not requiring an outlay of working funds - Depreciation	5,077,083	4,449,159
Donations received for Capital Expenditures	792,918	2,163,272
Total Working Capital Provided	8,254,483	13,098,404
Application of Working Capital		
Purchases of equipment - net	4,513,950	4,675,426
Transfer of Depreciable Equipment from Redevelopment Fund	34,710	553,929
Expenditure to buildings owned by the City of Hamilton	1,445,597	893,251
Transfer to Redevelopment Fund	3,487,860	1,231,987
Construction in Progress	134,870	—
Total Application of Working Capital	9,616,987	7,354,593
(Decrease) Increase In Working Capital	(1,362,504)	5,743,811
Working Capital (Deficiency) Beginning of Year	3,913,366	(1,830,445)
Working Capital End of Year	\$2,550,862	\$3,913,366

AUDITORS' REPORT

TO THE BOARD OF DIRECTORS OF
HAMILTON CIVIC HOSPITALS

We have audited the balance sheet of the Hamilton Civic Hospitals as at March 31, 1992 and the statements of revenue and expense and operating fund balance, and changes in financial position for the year then ended. These financial statements are the responsibility of the hospitals' management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit

Statement of Revenue and Expense and Operating Fund Balance

for the year ended March 31, 1992

Revenue	1992	1991
Ministry of Health Funding		
- Hospital Services	\$207,289,094	\$193,499,700
- Subsidiary Services	2,895,438	3,324,747
Patient Services Revenue	17,824,625	15,443,502
Other Income	5,448,402	4,808,033
Total Revenue	233,457,559	217,075,982
Expense		
Care of Patients	149,411,393	134,342,828
Patient Support Services	28,770,364	28,097,484
General Services	43,756,554	39,259,512
Depreciation	5,077,083	4,449,159
Other Expense	1,162,245	1,116,279
Subsidiary Expenses	2,895,438	3,324,747
Total Expense	231,073,077	210,590,009
Surplus for Year	2,384,482	6,485,973
Operating Fund Beginning of Year	28,886,682	22,362,675
Add		
- Donations	792,918	2,163,272
	32,064,082	31,011,920
Less		
- Expenditures to buildings owned by the City of Hamilton	1,445,597	893,251
- Transfer to Redevelopment Fund	3,487,860	1,231,987
Operating Fund End of Year	\$ 27,130,625	\$ 28,886,682

includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the hospitals as at March 31, 1992 and the results of its operations and the changes in financial position for the year then ended in accordance with generally accepted accounting principles.

MacGillivray Partners
CHARTERED ACCOUNTANTS

Hamilton, Canada
June 3, 1992

Notes to Financial Statements

Note 1 - Significant Accounting Policies:

- (a) The financial statements have been prepared using the accrual method of accounting. Revenue is recorded when earned and expenses are recorded when incurred. The financial statements do not include the assets, liabilities and activities of any organizations such as the Volunteer Association and the Foundation which, although related to the Hospitals, are not operated by it.
- (b) Inventories are carried at the lower of cost and replacement value. The moving average cost method is used to value stores inventory. The first in, first out cost method is used to value pharmacy and other departments' inventories.
- (c) Fixed assets are recorded at cost and depreciated on a straight-line basis over their estimated useful lives, from 1 to 20 years.
- (d) Under the sick leave benefit plan for employees, unused sick leave accumulates and may be used for sick time in future years. In addition, employees with five years or more service are entitled to cash payments on a portion of their sick bank upon termination of employment. It is the policy of the Hospitals not to recognize the amount of the liability of the sick bank in the financial statements, but to consider any payments from the accumulated sick bank as an expense in the year of payment.
- (e) Donations are accounted for as increases in the operating fund balance.
- (f) Capital grants, except for the Hamilton General Division Redevelopment, are applied against expenditures incurred for additions and improvements to buildings which are owned by the City of Hamilton.

Note 2 - Redevelopment Fund

The Hamilton General Division Redevelopment project amounted to \$87,300,000. The project included \$15,900,000 of depreciable new equipment which was transferred to the Operating Fund over the construction period.

The Redevelopment project was completed in 1992 and the buildings, amounting to \$71,400,000, were contributed to the City of Hamilton.

Note 3 - Pension Plan

Substantially all of the employees of the Hospitals are eligible to be members of the Hospitals of Ontario Pension Plan which is a multi-employer defined benefit final average pay contributory pension plan.

Employer contributions made to the plan during the year by the Hospitals amounted to \$4,173,000 for 1992 and \$3,362,000 for 1991.

The most recent actuarial valuation of the plan as at December 31, 1990 indicates the plan is fully funded.

Note 4 - Public Liability Insurance

Hamilton Civic Hospitals is a member of the Healthcare Insurance Reciprocal of Canada (HIROC).

HIROC is a pooling of the public liability insurance risks of its members. All members of the pool are subject to assessment for losses experienced by the pool for the years in which they were members, on a pro rata basis, based on the total of their respective deposit premiums. To March 31, 1992 no assessments have been made. The Hospitals have expensed deposit premium as an administrative expense amounting to \$1,045,000 for 1992 and \$1,002,000 for 1991.

Note 5 - Contingency

The estimated maximum liability for termination sick bank payments at March 31, 1992 amounts to approximately \$9,237,000 (March 31, 1991—\$8,714,000). The termination sick bank payments were \$631,000 for 1992 and \$700,000 for 1991.

Stats 1992

Facts & Figures

	HAM. GEN.	HEND. GEN.	TOTAL		HAM. GEN.	HEND. GEN.	TOTAL
HUMAN RESOURCES				Occupational Therapy			
Paid Hours	3,516,611	3,205,602	6,722,213	attendances	13,662	13,212	26,874
EMPLOYEES (FULL TIME EQUIVALENT)				Out-patient visits.....	63,349	54,233	117,582
Nursing.....	930	790	1,720	Physiotherapy attendances...	47,133	44,159	91,292
Other	859	842	1,701	Speech therapy attendances .	983	1,334	2,317
TOTALS	1,789	1,632	3,421	Nuclear medicine units	625,100	315,306	940,406
SET UP BEDS				Medical diagnostic visits.....	2,053,153	1,123,003	3,176,156
Private.....	64	54	118	Surgical operations	12,660	13,236	25,896
Semi-Private.....	126	143	269	Diagnostic imaging			
Standard	201	308	509	examinations.....	89,957	73,774	163,731
Bassinets	0	86	86	Nutrition counselling visits ..	5,916	1,839	7,755
TOTALS	391	591	982	OTHER SERVICES			
MEDICAL SERVICES				Meals served	677,424	757,329	1,434,753
Autopsies.....	616	123	739	PATIENTS - ACTIVE			
Emergency visits	45,045	32,877	77,922	Admissions	11,714	14,377	26,051
Laboratory units.....	9,160,840	9,256,398	18,417,238	Separations.....	11,689	13,959	25,657
				Patient days.....	126,244	136,508	262,752
				Average days of stay	11.2	10.3	10.7

In-patient Cases 1991

	HAM. GENERAL		HEND. GENERAL		TOTAL	
	Patients	Days	Patients	Days	Patients	Days
Cardiology and Cardiovascular.....	3,658	32,157	853	8,915	4,511	41,072
* Dental	82	222	36	92	118	314
Dermatology	1	10	49	514	50	524
General Surgery.....	1,480	14,105	1,708	12,194	3,188	26,299
Gynecology	1	2	1,693	11,836	1,694	11,838
* Medicine	2,109	37,472	3,845	52,007	5,954	89,479
Neurology and neurosurgery	1,068	19,369	257	10,757	1,325	30,126
Newborn.....	—	—	1,963	8,017	1,963	8,017
Obstetrics - Not Delivered	—	—	356	965	356	965
Obstetrics - Delivered	—	—	1,957	8,567	1,957	8,567
* Ophthalmology	123	209	3	8	126	217
Orthopedic	1,383	15,998	877	16,226	2,260	32,224
Otolaryngology	261	465	249	1,071	510	1,536
Pediatrics	—	—	68	1,389	68	1,389
* Plastic Surgery	454	3,763	36	194	490	3,957
* Psychiatry	65	2,159	151	4,814	216	6,973
Respirology	—	—	541	6,565	541	6,565
Thoracic Surgery	48	404	—	—	48	404
Trauma.....	298	6,862	—	—	298	6,862
Urology.....	607	4,319	1,068	6,593	1,675	10,912
TOTALS	11,644	138,060	15,721	153,003	27,365	291,063

*not including out-patient cases

Medical Staff Advisory Committee

Chairman - Dr. W.E. Pine
Vice-Chairman - Dr. K. Ockenden

DEPARTMENT OF ANESTHESIA

Chief - Dr. G. Dunn
Head of Service, Hamilton General - Dr. R. Bell
Head of Service, Henderson General - Dr. W.E. Pine

DEPARTMENT OF CRITICAL CARE

Chief - Dr. J.R. Hewson

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Hamilton General Division
Chief - Dr. M.A. Romeo
Henderson General Division
Chief - Dr. J.G. Thomson (to January 1992)
Dr. T. Minuk (From February 1992)

DEPARTMENT OF EMERGENCY CARE

Chief - Dr. K.A. Ockenden

DEPARTMENT OF EYE MEDICINE AND SURGERY

Chief - Dr. H.C. Witelson

DEPARTMENT OF GENERAL PRACTICE

Chief - Dr. B. Vedelago
Member-at-Large - Dr. A. Mazza-Whelan

DEPARTMENT OF LABORATORY MEDICINE

Hamilton General Division
Chief - Dr. M.J. McQueen
Henderson General Division
Chief - Dr. J.H. Thornley

DEPARTMENT OF MEDICINE

Chief - Dr. T.L. Seaton
Deputy Chief, Hamilton General - Dr. A.G.G. Turpie
Deputy Chief, Henderson General - Dr. D.E. Dwyer

Service of Cardiology

Head - Dr. D.A. Holder

Service of Clinical Hematology

Head - Dr. G.P. Browman (to January 1992)
Dr. R. Meyer (from February 1992)

Service of Dermatology

Head - Dr. P.J. Jenkin

Service of Endocrinology/Metabolism

Head - Dr. A.R. McNabb

Service of Gastroenterology

Head - Dr. T.L. Seaton (to September 1991)
Dr. B. Lumb (from October 1991)

Service of General Internal Medicine

Head - Dr. D.E. Dwyer

Service of Infectious Diseases

Head - Dr. L. Mandell

Service of Neurology

Head - Dr. R.J. Duke

Service of Nuclear Medicine

Head - Dr. C.N. Best

Service of Rehabilitation Medicine

Head - Dr. D. Harvey (from September 1991)

Service of Respiriology

Head - Dr. R.W. Cornett

Service of Thromboembolism

Head - Dr. J. Weitz (from December 1991)

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

Chief - Dr. K.G. Lamont (to November 1991)
Dr. D. Pond (from December 1991)

DEPARTMENT OF PEDIATRICS

Acting Chief - Dr. T.L. Seaton

DEPARTMENT OF PSYCHIATRY

Chief - Dr. A.C. Carr (to October 1991)
Acting Chief - Dr. S. Dziurdzy (from December 1991)

DEPARTMENT OF SURGERY

Chief - Dr. J. Gunstensen
Deputy Chief, Hamilton General - Dr. W.P. Finn
Deputy Chief, Henderson General - Dr. E.G. Isbister

Service of General Surgery

Head, Hamilton General - Dr. W.P. Finn
Head, Henderson General - Dr. N. Gagic

Service of Neurosurgery

Head - Dr. S.W. Schatz (to April 1992)
Interim Head - Dr. J. Wells (from May 1992)

Service of Orthopedics and Fractures

Head - Dr. I.W. Blackstone

Service of Otolaryngology

Head - Dr. J.R. Cranston

Service of Plastic Surgery

Head - Dr. S.B. Heddle

Service of Cardio-Thoracic Surgery

Head - Dr. B.W. Shragge

Service of Urology

Head - Dr. I. Davis

Dental Staff

Head - Dr. E.M.G. Dore

CANCER CENTRE

Director - Dr. W.M. Hryniuk (to January 1992)
Acting Director - Dr. M. Levine (from February 1992)

RESEARCH DIRECTOR

Dr. J. Hirsh

McMaster University, Faculty of Health Sciences Representatives

Dr. S. MacLeod, Dean, Faculty of Health Sciences (to January 1991)
Dr. J. Bienenstock, Vice-President/Dean (from February 1992)
Dr. M. Cohen, Associate Dean, Health Services

Medical Staff - Elected Representatives

President - Dr. A. Szereszewski
Vice-President - Dr. A. Cividino
Secretary - Dr. S. Wooder

Administration Representatives

President and Chief Executive Officer - Dr. W.E. Noonan
Vice-President, Medical Affairs - Dr. J.M. Phin

Vice-President, Hamilton Civic Hospitals and Chief Operating Officer, Henderson General Division

Dr. E.G. Woodward (to July 1991)
Mrs. T. Fee (from August 1991)

Vice-President, Hamilton Civic Hospitals and Chief Operating Officer, Hamilton General Division

Mr. P.C. Johnson

Assistant Administrator, Patient Care, Hamilton General
Miss M. Charters

Director of Nursing, Henderson General - Mrs. P. Mandy

Board of Directors - Dr. I.O. Stewart



3 2022 21335628 6

RETURN POSTAGE GUARANTEED

Hamilton Civic Hospitals
237 Barton Street E.
Hamilton, Ontario
L8L 2X2

MAIL  **POSTE**

Canada Post Corporation / Société canadienne des postes

Postage paid

Port payé

Bik

Nbre

3203

HAMILTON, ONT.

Ms. Ruth Greenwood
Urban Municipal Librarian
Hamilton Public Library
PO Box 2700, Stn. A.
Hamilton, Ontario L8N 4E4